

# Division of Behavioral Health Services 2005 Consumer Survey

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# **Table of Contents**

		Page
I.	Executive Summary	1
II.	Introduction	3
III.	Survey Design and Methodology A. Survey Planning B. Sampling Design C. Survey Instruments and Administration D. Data Management, Analysis and Data Weighting E. Training and Technical Assistance	4 5 7
IV.	Survey Participation A. Response Rates B. Test of Representativeness	
V.	Results A. Overall Statewide Findings. B. Adult Consumer Survey i. Demographic Profile. ii. Domain Analysis. iii. Item Analysis. iv. Subgroup Analysis: Written Comments. C. Youth Services Survey for Families i. Demographic Profile. ii. Domain Analysis. iii. Item Analysis. iv. Subgroup Analysis. iv. Subgroup Analysis. v. Thematic Analysis: Written Comments D. State-Added Questions i. Adult Consumer Survey. ii. Youth Services Survey for Families.	13 15 16 18 21 23 24 26 27 30
VI.	Title XIX/XXI Survey Analysis	35
Addend	dum: A. Benchmarking With Other States B. Benchmarking With Past Performance C. Survey Limitations, Issues, and Problems	51
Append	dices:  A. Survey Instruments, Cover Letters, Scoring Protocol  B. Consumer Comments (CD)	

# **Executive Summary**

The statewide consumer survey was conducted in spring of 2005 jointly by the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS), the Tribal/Regional Behavioral Health Authorities (T/RBHAs) and their contracted service providers.

The 2005 Statewide Consumer Survey was built on past experiences of 1999, 2001, and 2003 consumer survey efforts. Two distinct surveys, based on the Substance Abuse and Mental Health Services Administration's Mental Health Statistics Improvement Program (MHSIP) Consumer Surveys, were administered. The surveys solicited independent feedback from adults and families of youth receiving services through Arizona's publicly funded behavioral health system. The surveys provided information regarding consumer perception in several domains: General Satisfaction, Access to Services, Quality and Appropriateness of services, Participation in Treatment Planning, Cultural Sensitivity, and Outcomes.

Innovative changes initiated in the 2003 survey were continued in the 2005 administration of the statewide consumer survey. Further improvements were implemented, particularly in the areas of enhanced training strategies and materials to prepare RBHAs and providers for the survey process; enhanced promotional materials to inform consumers; and a modified sampling methodology to simplify the administration process.

The MHSIP Consumer Survey was distributed to a statewide sample of over 4,000 clients. The statewide response rate was 77%. For the Adult Consumer Survey, 1,347 completed surveys were analyzed. Analysis of the Youth Services Survey for Families (YSS-F) included 1,193 completed surveys.

Results of the 2005 MHSIP Adult Consumer Survey show slightly lower rates of consumer satisfaction than were found in 2003. However, the majority of consumers still express satisfaction with the services they receive, particularly with the quality and appropriateness of services. Satisfaction with the outcome of the services received remains the lowest of all domains. Findings of the Adult Consumer Survey showed that 80% of the respondents reported positively about General Satisfaction, 75% reported positively about Access to Services, 84% reported positively about Quality and Appropriateness of Services, 71% reported positively about Participation in Treatment Planning, and 63% reported positively about Outcomes. Survey items that were endorsed by the largest percentage of respondents were in the Quality/Appropriateness of Services domain, where 89% of respondents indicated that they were given information about their rights, and 86% reported feeling comfortable asking questions about their treatment. Responses to the open-ended questions for the vast majority of respondents reflected satisfaction with, and thankfulness for, the services they received. Answers to the state-added questions reflected that 86% of respondents understood why the doctor had recommended medications for them, and for 83%, the doctor had answered questions about the medications in a way that the respondent understood.

Results of the Youth Services Survey for Families also showed slightly lower rates of consumer satisfaction compared to 2003 survey results. 74% of the respondents reported positively about General Satisfaction, 72% reported positively about Access to Services, 84% reported positively about involvement in Treatment Planning, 92% reported positively on Cultural Sensitivity, and 60% reported positively about Outcomes. Survey items endorsed by the largest percentage of respondents related to Cultural Sensitivity: 93% of respondents indicated that staff spoke with them in a way that they understood, and 93% agreed that staff were sensitive to their cultural/ethnic background. As was observed in the Adult Consumer Survey, responses to the open-ended questions mostly expressed thankfulness for the services received and satisfaction with the treatment and/or staff. In response to the state-added questions, 86% of respondents indicated that they had given consent for prescribing medication to their child. Eighty-eight

percent stated that their child is staying out of trouble with the law, and 82% felt that their child is enrolled at the appropriate grade level in school.

Overall, consumer perception of the quality and appropriateness of the services received remains high. As was seen in previous survey administrations, consumer perception of outcomes of their treatment remains an area for improvement.

Summary of Statewide Results (Numbers are based on actual valid survey returns. Percentages are based on weighted scores.)

		Number/Percent Reporting Positively About:														
Adult Consumer Survey		neral action	Service Access		Service Quality and Appropriateness		Treat	ation in ment ning	Outcomes							
Statewide	1031	80%	962	75%	1039	84%	846	71%	788	63%						
CPSA 3	173	78%	158	75%	183	88%	147	75%	145	70%						
CPSA 5	244	74%	217	66%	236	76%	192	65%	165	53%						
EXCEL	116	85%	110	80%	113	88%	100	81%	90	71%						
NARBHA	157	80%	143	74%	159	85%	127	72%	113	62%						
PGBHA	113	86%	121 93%		117	94%	97	84%	98	80%						
ValueOptions	228	82%	213	78%	231	85%	183	72%	177	65%						

			Nun	nber/Pe	rcent Re	porting F	Positively	/ About:			
YSS-F	General Satisfaction		Access to Services		Participation in Treatment			ural itivity	Outcomes		
Statewide	830	74%	667	72%	918	84%	870	92%	657	60%	
CPSA 3	123	73%	128	86%	128	76%	148	91%	96	59%	
CPSA 5	199	68%	146	61%	234	80%	210	88%	173	59%	
EXCEL	86	74%	70	71%	98	82%	92	92%	70	65%	
NARBHA	127	79%	94	76%	135	83%	119	88%	89	57%	
PGBHA	97	79%	76	78%	101	82%	99	93%	74	62%	
ValueOptions	198	75%	153	72%	222	85%	202	93%	155	61%	

#### INTRODUCTION

The Arizona Department of Health Services (ADHS) and the Regional Behavioral Health Authorities (RBHA), in collaboration with their providers, administered the statewide consumer survey in spring of 2005. As in the past survey cycles, the surveys are primarily based on the Mental Health Statistics Improvement Program (MHSIP)'s recommended Adult Consumer Survey and Youth Services Survey for Families. The use of the MHSIP surveys allows Arizona to continue to benchmark its performance with other states from across the nation, as an increasing number of states have adopted the MHSIP surveys.

The 2005 survey continued to implement the innovative changes initiated in the 2003 statewide consumer survey. Although the distribution method remained unchanged, several enhancements to the survey planning and administration phases were implemented:

- ➤ Consumers, family members, and providers were added to the planning and to the training development groups.
- Several training points were highlighted during the planning process and incorporated in the training materials.
- Enhanced training strategies and materials to increase awareness of the upcoming survey were developed for use by provider staff.
- Promotional materials were used to inform consumers about the upcoming survey through the use of flyers, website announcements, and videotapes.
- The sampling methodology was changed to include a modified over-sampling technique to simplify the administration process.

Analysis of the survey responses followed the methodology developed for the 2003 survey. Benchmarking with other states and against past survey performance is also continued.

The use of the survey data to inform decision making for effective and efficient service delivery is promoted through a widespread dissemination of the survey results. The RBHAs present and discuss the results with their respective provider groups and community stakeholders. ADHS disseminates the results to the Human Rights Committee, Behavioral Health Planning Council, other consumer advocacy groups, and to the Governor's Office where the statewide overall satisfaction rating is reported as one of the Department's performance measures. The experience and outcome of the survey is also reported to the National Association of State Mental Health Program Directors' Research Institute (NRI), Western States Decision Support Group (WSDSG), and to the Substance Abuse and Mental Health Services Administration's Mental Health Statistics Improvement Program (MHSIP).

#### SURVEY DESIGN AND METHODOLOGY

This section deals with the planning and design phase of the survey. It includes discussion on the sampling design, survey administration method, data analysis, and training/technical assistance that were provided in the course of administering the survey.

# Survey Planning

The protocol for the 2005 statewide consumer satisfaction survey was developed through research and planning meetings conducted by ADHS/DBHS. Participants in the planning process represented a diverse group of stakeholders involved in the survey process, i.e. consumers, family members, consumer advocates, behavioral health providers, quality management staff of the Regional Behavioral Health Authorities (RBHAs) and the ADHS staff. Based on lessons learned from the 2003 survey process, the modifications of the survey protocol were agreed upon.

# Sampling Design

Two survey populations (sample frames) were identified: adults and children/adolescents. Adults are defined as consumers who are 18 years or older, and are enrolled in any of the adult programs, i.e. Serious Mental Illness (SMI) and Drug/Alcohol or General Mental Health (Non-SMI). Youth is defined as persons 18 years and younger, and enrolled in the Child/Adolescent program. The sample frames are composed of all consumers enrolled as of January 1, 2005 who met the following eligibility criteria:

- 1. Consumers must have received a community-based mental health service other than transportation, laboratory and/or radiology services, or crisis services;
- 2. Services must have been received within the recent six months; and
- 3. Consumers must not be receiving services in an inpatient setting at the time the sample frame is developed.

In addition to the above, the following consumers were excluded from the sample frame:

- 1. Consumers who have been disenrolled from the system, as the survey focuses on currently enrolled consumers.
- 2. Consumers receiving services from fee-for-service providers. Due to administrative burden, fee for service providers were excluded. This particularly applied to consumers in the Pima and Southern Arizona counties.
- 3. Consumers receiving services from ValueOption's "small" providers, serving less than 75 consumers. This represented approximately 1% of the total ValueOptions population.

A total of 66,507 adult consumers and 26,970 children/adolescents (Title XIX/XXI and Non-Title XIX/XXI), or about 90% of the total enrolled population, were eligible to participate in the survey.

For both the adult and the children/adolescent survey populations, ADHS/DBHS determined the state sample size stratified at the RBHA level that is statistically valid using a 95% confidence level and a confidence interval (margin of error) of 5%. The determined sample size was adjusted by 50% to allow for over-sampling of cases. By utilizing an over-sampling methodology, the complexity associated with the previous survey cycle was avoided. The 50% over-sample was expected to address the rate of non-participation as a result of consumer no-show for scheduled appointments or non-response. The computed state sample size for the Adult Consumer Survey is 2,109, while for the YSS-F the computed state sample size is 1,935. ADHS provided each RBHA with the calculated sample size, including the over-sample. Each RBHA then conducted a stratified random selection of consumers using the SPSS random sampling program and advised each provider of its sample population. Consumers were linked to the provider where their clinical liaison is affiliated. Providers reviewed their sample list to determine that at least 85% of the selected consumers had scheduled appointments during the survey period. The random selection was repeated until this criterion was satisfied.

# Survey Instruments and Administration

Two MHSIP consumer surveys were administered in 2005: the 28-item version of the Adult Consumer Survey and the final version of the Youth Services Survey for Families (YSS-F).

The 28-item version of the MHSIP Adult Consumer Survey measures five domains:

- 1. Service accessibility
- 2. Service quality or appropriateness (which includes 2 items concerning cultural sensitivity)
- 3. Consumer participation in treatment planning
- 4. Outcomes
- 5. General Satisfaction

The 21 items of the MHSIP Youth Services Survey for Families measure the following five domains:

- 1. Service accessibility
- 2. Participation in treatment planning
- 3. Cultural sensitivity
- 4. Satisfaction with services
- 5. Outcomes

Both surveys use a Likert Scale of 1 though 5, with 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, and 5 = strongly agree, plus a "not applicable" item.

Each survey type has four main sections:

- 1. Demographic section
- 2. MHSIP survey questions
- 3. State-specific questions
- 4. Open-ended qualitative section

The demographic section provides descriptive information about the consumer's age, gender, race, ethnicity, duration of mental health/substance abuse services, and the relationship of the person completing the survey to the service recipient. Other information used for further data stratification, i.e. entitlement status of the consumer (TXIX, TXXI, or NTXIX/TXXI), consumer's program/fund source (SMI, Non-SMI, Children), and the distribution method (home or clinic) was pre-filled by the provider prior the survey distribution.

State-specific questions added to the MHSIP Adult Consumer Survey pertain to medication consent, cultural sensitivity, and the use of advocacy/support services. In the YSS-F, state-specific questions primarily focus on issues of medication consent, support services, satisfaction with Child and Family Teams, and criminal justice involvement. Similar to the MHSIP items, the state-specific questions are scored using the five-point Likert scale.

The fourth and final section of the surveys contains open-ended questions to solicit consumer comments identifying what has been most helpful about the services, and what the consumer believes would improve services. An additional item for other comments was added to allow the consumer to provide open-ended feedback on any issue.

As in the past, surveys were available to consumers in both English and Spanish versions, printed back-to-back on the forms. For consumers with limited English proficiency who speak a language other than Spanish, RBHAs and providers were instructed to translate the survey in the consumer's preferred language by utilizing the Language Line or any other translation/interpretation service officially utilized by the RBHA or their provider.

ADHS/DBHS provided statewide oversight of the survey process through periodic monitoring and consultation with the RBHAs. The RBHAs provided training, direct oversight, and technical assistance to their providers and were primarily responsible for ensuring consistent implementation of the protocol.

Surveys were primarily administered at the provider service sites as consumers checked in for appointments. The providers used the control file to determine if the consumer had been preselected for the survey. If a consumer name appeared on the control file, s/he was offered the survey and asked to complete it prior to leaving the provider office and to leave it in a specified drop-box. For children/adolescents receiving services, the survey was given to the parent or other responsible adult accompanying the child at the time of appointment. If the randomly selected consumer had a scheduled appointment at home during the survey window, the provider staff brought the survey to the appointment. If the consumer agreed to participate, s/he was advised to complete the survey after the staff had left and to mail the completed questionnaire using the pre-addressed, stamped envelope provided with the survey.

Consumers who were not pre-selected for the survey, but had learned about it through the promotional materials and expressed an interest in participating, were provided with a color-coded version of the survey. The use of color-coding allowed separating the random sample from the non-random survey responses for the analysis of the survey results. All analysis by ADHS/DBHS for the purpose of this report includes data from random sample surveys only.

Surveys were administered across the state during the months of April and May 2005.

# Data Management, Analysis and Data Weighting

ADHS/DBHS contracted with a vendor to complete all data scanning. All completed surveys were scanned using OCR technology. RBHAs were provided with data files containing the survey responses of their respective consumers. Each RBHA analyzed their respective survey data using an SPSS script that was provided by ADHS/DBHS to ensure consistency in data analysis.

A statewide analytic file was then analyzed as follows:

- By Domain: Using the MHSIP scoring protocol, analysis includes the percent responding positively, average domain scores, and confidence interval. Data are presented statewide and by RBHA. Data are based on weighted scores and the actual number of surveys returned.
- ➤ By Survey Item: An analysis of the statewide average score for each item, standard deviation, and the percentage of respondents who reported positively on each item was completed. Data are based on weighted averages.
- Sub-group analysis: The statewide domain scores by race, ethnicity, gender and age were broken down and analyzed.
- Consumer comments: Thematic analysis of written consumer comments on the following three areas was done: what was helpful, what needs improvement, and other comments.
- > State-added questions: Frequency distribution of responses is reported for each question.

Weights were applied to data based on the RBHA population eligible for the survey (i.e., sample frame), following the same methodology that was developed for the 2003 survey data. The eligible survey population is a more appropriate base weight, as opposed to total RBHA enrolled population, in view of the application of the selection (exclusion) criteria discussed in the preceding section. Weights are statistical adjustments to correct biases that may be created by non-response or unequal rates of response across regions of the state (i.e., across RBHAs). Weighting literally involves a process of statistically assigning more or less weight to some groups than others so that their distributions in the sample correspond more closely to their actual distributions in the population from which they were drawn (Kish, 1990).

Since the sampling design involves only a single-stage stratification of the population at the RBHA level (as opposed to multistage stratification by subgroup, i.e. age, gender, race, ethnicity, program, entitlement), the weights correspond only to check the non-response or unequal rates of response of the eligible survey population as a whole irrespective of the demographic composition. To verify that this method is not biased, a test of representativeness of the statewide data by subgroup showed no statistical difference from the demographic distribution of the sample frame. Thus, the weighted data is not statistically different from the unweighted or unadjusted subgroup data.

The weight formula is simply the inverse of the sampling fraction, or the proportion of survey respondents to total sample frame for each RBHA. In algebraic terms, it is given as:

 $W_{RBHA} = N/n$ 

Where:

W<sub>RBHA</sub> = assigned weight for each RBHA N = total population in the sample frame

n = total survey respondents

# Training and Technical Assistance

In the course of providing oversight of the statewide survey administration, ADHS/DBHS extended technical assistance to the RBHA staff in a number of ways:

- Trained RBHA staff on the survey protocol and administration process.
- > Developed an enhanced training kit used by RBHAs to train providers on the survey administration, including videotaped consumer testimonials and instructions for providers.
- Developed new cover letters to be attached to the survey questionnaires, containing messages from consumers.
- > Developed a survey administration flow chart, time lines and deliverables for easy reference and guidance.
- Contracted with a vendor to scan all completed surveys.
- Developed SPSS syntax used to process and analyze data.
- Provided each RBHA with data files containing the survey responses.
- Provided guidance in data interpretation and analytical methods.

#### SURVEY PARTICIPATION

This section provides a discussion of the survey response rate and test of representativeness conducted on the sample and survey respondents relative to the sample frame (eligible survey population).

# Response Rates

Response rate is computed as the ratio of total surveys returned to the total number of surveys distributed. 'Total number of surveys distributed' is defined as the number of cases where the client was actually requested to participate in the survey, whether they completed the survey or not. The total number of surveys returned was used as the numerator and the total number of surveys distributed was used as the denominator.

Table 1: Survey Response Rates

RBHA	Surveys Distributed (a)	Surveys Returned (b)	Response Rate (b)/(a)
CPSA	1,130	1,079	95%
EXCEL	591	271	46%
NARBHA	609	370	61%
PGBHA	369	261	71%
VALUEOPTIONS	596	559	94%
STATEWIDE	3,295	2,540	77%

Due to a change in vendor for two of the RBHAs (EXCEL and PGBHA), not all data pertaining to the survey administration was available. Consequently, the most complete data available was used for the above table. Data for the number of surveys distributed is based on RBHA report, while the number of surveys returned is based on the number of scanned surveys. A calculation of separate response rates for the two survey types (Adult Consumer Survey and YSS-F) was not possible.

The statewide response rate is 77%. The survey response rate across RBHAs ranges from a low of 46% in EXCEL to a high of 95% in CPSA. CPSA and EXCEL markedly increased the number of surveys distributed, while the remaining RBHAs distributed fewer surveys than in 2003.

# Test of Representativeness

In order to verify the representativeness of the sample population, each RBHA completed a comparison of the sample and the sample frame with respect to the following demographic variables: entitlement status, gender, age, race and ethnicity. This process was also completed at the state level. A yardstick of +/- 3 % was used for determining representativeness. This test of representativeness was conducted to ensure that the sample population mirrors the larger population eligible for the survey. According to the results, the sample population is considered to be representative of the sample frame.

A similar test was conducted to test the representativeness of the survey respondents.

- For the Adult Consumer Survey, the differences between the two groups are: 10% more Title XIX/XXI respondents, 11% more Hispanic respondents, and 6% more White respondents, while the rest of the parameters were within the allowable difference.
- For the YSS-F, the differences between the two groups are: 11% more Title XIX/XXI respondents, and 8% more Hispanic respondents, while the rest of the parameters were within the allowable difference.

None of these differences are significant to warrant statistical adjustment of the data by demographic characteristics of the population.

# **RESULTS**

This section discusses in detail the results of the statewide survey using descriptive statistics and thematic analysis. Discussion is divided into four parts: (1) overall statewide findings – highlights of the findings of the survey using both the quantitative (items measured using the Likert Scale) and qualitative data (consumer comments); (2) Adult Consumer Survey – this presents the demographic profile of the respondents, discussion of the domain scores, average score of each survey item, results by subgroup analysis, and thematic analysis of the adult consumer comments; (3) Youth Services Survey for Families (YSS-F) – this presents the demographic profile of the clients whose family member participated in the survey, discussion of the domain scores, average score of each survey item, results of subgroup analysis, and thematic analysis of the family member comments; and (4) state added questions – this summarizes the results of additional questions developed by the state.

# **Overall Statewide Findings**

The general satisfaction of adult consumers and family members of youth receiving behavioral health services remains high, with 80% of adult respondents and 74% of YSS-F respondents expressing satisfaction. The Outcomes domain received the lowest satisfaction rate with only 63% of adult and 60% of YSS-F respondents reporting positively.

Analysis of the survey items showed that for the Adult Consumer Survey, the items receiving the highest percentage of positive responses were in the Quality and Appropriateness domain:

- ➤ I was given information about my rights. (89% positive responses)
- ➤ I felt comfortable asking questions about my treatment. (86% positive responses)

For the YSS-F, survey items with the highest percentage of positive responses were in the Cultural Sensitivity domain:

- > Staff spoke with me in a way that I understood. (93% positive responses)
- Staff were sensitive to my cultural/ethnic background. (93% positive responses)

Analysis of the domain scores by demographic subgroup showed that for the Adult Consumer Survey:

- African-American respondents expressed higher General Satisfaction as well as greater satisfaction with access to, and the quality/appropriateness of services than Caucasian respondents.
- > Hispanics were more satisfied with access to, and outcomes of services, than Non-Hispanic respondents.
- Male respondents were more satisfied with Access to Services than females.
- ➤ Older respondents (age 46 64) answered more positively than younger respondents across domains.

Non-SMI respondents expressed higher general satisfaction and were more satisfied with access to services, outcomes, and participation in treatment planning.

For the YSS-F, the following differences between groups of respondents were found:

- Caucasian respondents felt less positively about access to services, outcomes, and general satisfaction than African American respondents.
- ➤ Hispanic respondents were more satisfied than Non-Hispanic respondents, except in the area of cultural sensitivity.
- Female respondents scored higher in all domains except general satisfaction, where no difference was found.
- Families of older youth (ages 13–17) generally expressed less satisfaction than families of younger youth (ages 4–12), with the exception of cultural sensitivity where both groups scored equally high (92%).

The majority of responses to the open-ended questions reflected consumers' satisfaction with the services they received. For both adult and youth consumers, the treatment and clinical and non-clinical staff were perceived as the most helpful aspects of their treatment. Only a small percentage of responses to the question "What would improve the services that you (or your child) receive here?" actually contained suggestions for improvement. For the Adult Consumer Survey, these included access to services, the need for more individual counseling and information about medications, and timeliness of staff. For the YSS-F, areas for improvement were information regarding medications, access to services, and more frequent appointments. Responses to the third open-ended question "Other Comments?" were mostly reflective of consumers' satisfaction with, and thankfulness for, the services they or their child had received.

In response to the state added questions, adult consumers indicated that:

- > 86% understood why their doctor recommended medications for them.
- ▶ 83% felt that their doctor had answered questions about the medications in a way that they understood. Both these results are compatible with the answers to the survey item "I felt comfortable asking questions about my treatment and medication", where 86% of respondents had reported positively.
- Only 60% agreed that their cultural preferences and race/ethnicity were included in planning the services they received. This is markedly lower that the 79% who felt that staff were sensitive to their cultural background. However, while both items relate to the issue of cultural sensitivity, the MHSIP item focuses more on the way respondents felt treated by the staff, while the state-added item focuses on service planning.

Results for the state-added questions on the YSS-F were:

➢ 88% reported positively on items relating to medications, indicating that they understood why the doctor recommended medication for their child, told them about the possibility of important side effects, and/or answered questions about the medication in a way that they understood.

- > 86% of respondents indicated that they had given consent for prescribing medication to their child.
- > 88% indicated that their child is staying out of trouble with the law.
- 82% endorsed that their child is enrolled at the appropriate grade level in school.
- Only 58% responded positively on items relating to the availability of support services.

# Adult Consumer Survey

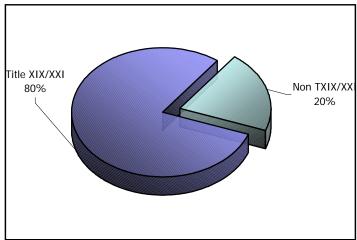
# Demographic Profile

Figure 1: Entitlement Status of Adult Consumer Survey Respondents

A total of 1,347 completed Adult Consumer Surveys were analyzed.

Eighty percent of the adult respondents were Title XIX/XXI eligible.

(Unit = Percent to Total)



Slightly fewer than half are enrolled in the program for persons with Serious Mental Illness and the rest were distributed between Substance Abuse and General Mental Health Programs.

For gender composition, 59% of respondents were female.

The racial distribution of the respondents was as follows: the majority are Caucasian (68%), followed by persons who did not declare a racial category of (21%), respondents who selected more than one race (4%), African Americans (3%), American Indian (3%), Asian (1%), and Native Hawaiian (<1%).

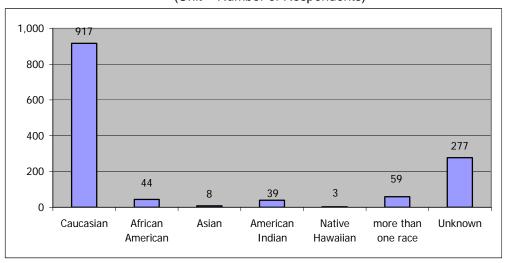


Figure 2: Racial Distribution of Adult Consumer Survey Respondents (Unit = Number of Respondents)

For ethnic breakdown, about 71% reported to be of Not Hispanic or Latino descent.

Most of the Adult Consumer Survey respondents were between 31 and 64 years old. About a third (37%) of respondents belong in the age category of 31-45, another third (36%) belong to the 46-64 group. The 21-30 age group was represented with about 17% of adult respondents, and the remaining were distributed between the 18-20 and 65+ age groups.

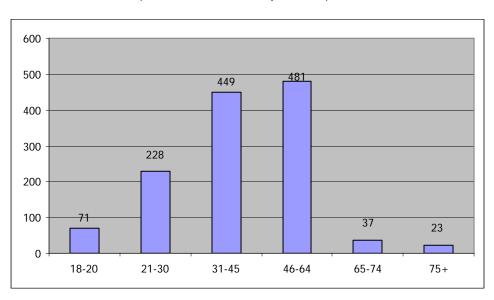


Figure 3: Age Distribution of Adult Consumer Survey Respondents (Unit = Number of Respondents)

Almost all Adult Consumer Surveys (94%) were completed by the service recipient him/herself.

About one-third of the Adult Consumer Survey respondents have been receiving mental health and/or substance abuse services for more than five years. About 25% received services for less than one year.

#### Domain Analysis

A domain score is a composite score of the survey items that comprised a particular domain. The Access domain includes questions pertaining to service location, timely response, and easy access to needed services. The Quality/Appropriateness of Services domain includes questions on staff attitude towards consumers, consideration of cultural and personal preferences in treatment, availability of peer-support programs, and illness self-management. The Outcomes domain includes questions on perception of functional/symptomatic improvements, social and family relationships, and one's sense of control over one's life. The Participation in Treatment Planning domain is comprised of two questions pertaining to the use and solicitation of consumer input in developing the treatment plan. The General Satisfaction domain is an overall assessment of the service delivery system.

The table below shows the number and percentage of respondents who responded positively (strongly agree or agree) on the survey items falling under each domain.

Table 2:	Statewide	Domain	Scores	(Adult	Consumer	Survey)

	Number of Positive Responses	Percent Responding Positively	Weighted Average Score	Confidence Interval*
Reporting Positively About Access	962	75%	3.931	3.923-3.939
Reporting Positively About Quality/Appropriateness	1039	84%	4.076	4.069-4.083
Reporting Positively About Outcomes	788	63%	3.711	3.702-3.719
Reporting Positively About Participation in Treatment Planning	846	71%	4.019	4.011-4.028
Reporting Positively About General Satisfaction	1031	80%	4.07	4.062-4.079

<sup>\*</sup>Using a 95% confidence level. Score >3.5 implies a positive response. The degree of agreement is stronger as the score approaches the value of 5.

General satisfaction was high for 80% of the respondents. Eighty-four percent of respondents expressed a positive perception of the quality and appropriateness of services received. The Access to Services and Participation in Treatment Planning domains posted mostly positive responses

(75% and 71% respectively). Similar to the findings of the previous surveys and the trend reported in other states, respondents' perceptions of outcomes trailed behind the other domains with 63% positive responses.

Table 3 below shows a RBHA comparison of the five domains:

Table 3: RBHA Domain Scores (Adult Consumer Survey)

			Domain									
RBHA	General Satisfaction	Access	Quality and Appropriateness	Outcomes	Participation in Treatment Planning							
Percent Responding Positively												
GSA-2	85%	80%	88%	71%	81%							
ValueOptions	82%	78%	85%	65%	72%							
NARBHA	80%	74%	85%	62%	72%							
GSA-4	86%	93%	94%	80%	84%							
CPSA 5	74%	66%	76%	53%	65%							
CPSA 3	78%	75%	88%	70%	75%							
Statewide	80%	75%	84%	63%	71%							

GSA-4 reported the highest percentage of positive responses across all domains, most markedly in the Access to Services domain, where 93% of respondents gave positive responses as compared to 75% statewide. Quality and Appropriateness of Services were rated highest of all domains across all RBHAs, ranging from 94% for GSA-4 to 76% for CPSA 5. For the General Satisfaction domain, three of the RBHAs (GSA-4, ValueOptions, and GSA-2) reported higher than the statewide percentage of 80% responding positively, while NARBHA was at the statewide level. A similar pattern was observed for Access to Services. GSA-4 with 84% positive responses posted the highest percentage responding positively for Participation in Treatment Planning, followed by GSA-2 (81%) and CPSA 3 (75%). Perception of Outcomes was rated least favorably for all RBHAs, and was highest in GSA-4 (80%), followed by GSA-2 (71%) and CPSA 3 (70%).

#### Item Analysis

Table 4 below shows the average score for each of the survey items, including the standard deviation and the percentage of respondents who responded positively to the item.

Table 4: Survey Item Scores (Adult Consumer Survey)

	Weighted						
	Average	Standard	Percent Responding				
Survey Item	Score	Deviation	Positively				
General Satisfaction:							
1. I like the services that I received here.	4.08	1.03	82%				
2. If I had other choices, I would still get services from this							
agency.	4.01	1.05	79%				
3. I would recommend this agency to a friend or family							
member.	4.11	1.03	83%				
Perception of Access:							
4. The location of the services was convenient (parking,	2.05	4.44	770/				
public transportation, distance, etc.).	3.95	1.11	77% 81%				
5. Staff were willing to see me as often as I felt it was necessary.	4.07	1.09	01%				
6. Staff returned my calls in 24 hours.	3.83	1.17	73%				
7. Services were available at times that were good for me.	4.10	1.17	83%				
-			76%				
8. I was able to get all the services I thought I needed.	3.92	1.14					
9. I was able to see a psychiatrist when I wanted to.	3.69	1.18	68%				
Participation in Treatment Planning:							
11. I felt comfortable asking questions about my treatment and medication.	4.19	0.94	86%				
17. I, not staff, decided my treatment goals.	3.83	1.07	70%				
	3.63	1.07	7076				
Quality/Appropriateness:	4.12	0.02	020/				
10. Staff here believe that I can grow, change and recover.	4.13	0.93	83%				
12. I feel free to complain.	4.01	1.04	79%				
13. I was given information about my rights.	4.21	0.88	89%				
14. Staff encouraged me to take responsibility for how I live my life.	4.16	0.89	84%				
15. Staff told me what side affects to watch out for.	3.95	1.06	77%				
16. Staff respected my wishes about who is and who is not	3.93	1.00	1170				
to be given information about my treatment.	4.19	0.91	85%				
18. Staff were sensitive to my cultural background (race,		0.0.	3373				
religion, language, etc.).	4.06	0.92	79%				
19. Staff helped me obtain the information I needed so that I							
could take charge of managing my illness.	3.99	0.98	79%				
20. I was encouraged to use consumer-run programs							
(support groups, drop-in centers, crisis phone line, etc.).	3.99	1.00	79%				
Outcomes:							
21. I deal more effectively with daily problems.	3.88	1.06	74%				
22. I am better able to control my life.	3.86	1.01	72%				
23. I am better able to deal with crisis.	3.78	1.06	69%				
24. I am getting along better with my family.	3.76	1.10	69%				
25. I do better in social situations.	3.59	1.14	61%				
26. I do better in school and/or work.	3.53	1.17	57%				
27. My housing situation has improved.	3.62	1.20	60%				
28. My symptoms are not bothering me as much.	3.61	1.17	63%				

The three survey items with the highest percentage of respondent agreement, from highest to lowest, are as follows:

- #13. I was given information about my rights. (89%; Quality/Appropriateness)
- #11. I felt comfortable asking questions about my treatment and medication. (86%; Participation in Treatment Planning)
- #16. Staff respected my wishes about who is and who is not to be given information about my treatment. (85%; Quality/Appropriateness)

The three survey items with the lowest percentage of respondent agreement, from lowest to highest, are as follows:

- #26. I do better in school and/or work. (57%; Outcomes)
- #27. My housing situation has improved. (60%; Outcomes)
- #25. I do better in social situations. (61%; Outcomes)

# Subgroup Analysis

The following analysis presents the statewide domain scores by respondent's demographic characteristics - race, ethnicity, age group, and gender. This also includes a discussion of the differences in perception of individuals enrolled in different programs. As may be observed in the tables and graphs presented, variations within subgroups exist.

Table 5: Statewide Domain Scores by Race (Adult Consumer Survey)

		Race													
	American Indian				African American		Native Hawaiian		Caucasian		More Than One Race		Unknown		
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	
Reporting Positively About Access	NA	NA	NA	NA	34	89%	NA	NA	652	74%	40	66%	205	79%	
Reporting Positively About Quality/Appropriateness	NA	NA	NA	NA	34	90%	NA	NA	731	84%	42	81%	198	81%	
Reporting Positively About Outcomes	NA	NA	NA	NA	NA	NA	NA	NA	547	64%	NA	NA	169	66%	
Reporting Positively About Participation in Treatment Planning	NA	NA	NA	NA	NA	NA	NA	NA	599	71%	35	60%	163	72%	
Reporting Positively About General Satisfaction	NA	NA	NA	NA	38	89%	NA	NA	712	80%	46	84%	203	78%	

Note: NA means n < 30.

Table 5 shows the percent of respondents reporting positively for each of the race subgroups, including those who selected more than one race, and those who did not select a race. Due to the low number of responses from American Indian, Asian and Native Hawaiian survey participants, comparisons include only African American and Caucasian respondents. African American respondents expressed higher General Satisfaction and satisfaction with Access to and the Quality/Appropriateness of Services than Caucasian respondents. Due to low numbers of African American respondents for these domains, no comparison for these two groups could be made in regard to Outcomes and Participation in Treatment Planning.

In terms of ethnic breakdown, the table below shows the distribution of respondents who responded positively in each of the domains. As can be seen in Table 6, a higher percentage of Hispanic respondents have a positive perception of Access to Services and Outcomes, and report more General Satisfaction. For Quality/Appropriateness of Services and Participation in Treatment Planning, Hispanic and Non-Hispanic respondents showed little or no difference.

Table 6: Statewide Domain Scores by Ethnicity (Adult Consumer Survey)

		Ethnicity								
	Hispani	ic/Latino	Non Hispa	nic/Latino						
	#	%	#	%						
Reporting Positively About Access	250	79%	602	75%						
Reporting Positively About Quality/Appropriateness	261	84%	670	85%						
Reporting Positively About Outcomes	212	67%	490	62%						
Reporting Positively About Participation in Treatment Planning	207	71%	549	71%						
Reporting Positively About General Satisfaction	264	83%	655	80%						

Table 7 shows that male and female respondents had very similar perceptions regarding their satisfaction with the Quality/Appropriateness of Services and their General Satisfaction, as well as their Participation in Treatment Planning and Outcomes. Male respondents had a higher percentage of positive responses regarding Access to Services.

Table 7: Statewide Domain Scores by Gender (Adult Consumer Survey)

		Gender						
	M	ale	Fer	nale				
	#	%	#	%				
Reporting Positively About Access	371	79%	513	75%				
Reporting Positively About Quality/Appropriateness	392	85%	565	85%				
Reporting Positively About Outcomes	295	63%	426	65%				
Reporting Positively About Participation in Treatment Planning	309	71%	473	73%				
Reporting Positively About General Satisfaction	389	82%	563	81%				

Adult respondents were grouped into six age bands. Table 8 below shows the distribution of positive responses by domain by age group. Due to the low number of respondents aged 65 and over, only respondents age 18-64 are included in the comparisons. Across all domains, older respondents answered more positively than younger respondents. All age groups, with exception of the 18-20 year respondents, gave the highest percentage of positive responses in the Quality/Appropriateness domain, while all age groups reported least positively in regard to Outcomes.

Table 8: Statewide Domain by Age Group (Adult Consumer Survey)

					Α	ge G	roup	)				
	18	18-20		21-30		31-45		46-64		65-74		5+
	#	%	#	%	#	%	#	%	#	%	#	%
Reporting Positively About Access	40	72%	158	73%	363	74%	355	77%	NA	NA	NA	NA
Reporting Positively About Quality/Appropriateness	43	73%	168	78%	389	83%	396	87%	NA	NA	NA	NA
Reporting Positively About Outcomes	34	60%	135	64%	297	62%	287	63%	NA	NA	NA	NA
Reporting Positively About Participation in Treatment Planning	31	62%	141	71%	324	71%	320	73%	NA	NA	NA	NA
Reporting Positively About General Satisfaction	43	76%	156	70%	382	78%	398	85%	NA	NA	NA	NA

Note: NA means the number of valid cases, n, is < 30.

Respondents were classified under the behavioral health program in which they are enrolled. Table 9 below shows the differences in responses of individuals enrolled in the program for Serious Mental Illness (SMI) and those enrolled in the Non-SMI program (persons receiving general mental health or substance abuse services).

Table 9: Statewide Domain Scores by Program (Adult Consumer Survey)

	Bel	Behavioral Health Program					
	9	SMI	Non-SMI				
	#	%	#	%			
Reporting Positively About Access	398	73%	556	77%			
Reporting Positively About Quality/Appropriateness	436	86%	596	86%			
Reporting Positively About Outcomes	314	59%	468	67%			
Reporting Positively About Participation in Treatment Planning	352	68%	486	74%			
Reporting Positively About General Satisfaction	439	79%	586	81%			

The data shows that respondents enrolled in the Non-SMI Program are more positive than those enrolled in the SMI Program, with the exception of the quality/appropriateness domain where both groups report equally high satisfaction with 86% positive responses. The largest difference was shown in the outcomes and participation in treatment planning domains.

# Thematic Analysis: Written Comments

The written comments are consumer responses to the open-ended questions included in the Adult Consumer Survey. The survey elicited comments for the following questions:

What have been some of the most helpful things about the services you received over the last 6 months?

What would improve the services that you receive here?

Other Comments?

Comments were tabulated and classified into positive and negative comments. They were then reviewed for presence of themes. A total of 1,183 surveys with responses to open-ended questions were analyzed (CPSA 3: n=202; CPSA 5: n=286; GSA-2: n=143; NARBHA: n=161; GSA-4: n=103; and ValueOptions: n=288). Tables 10 – 12 show the percent of responses by thematic category statewide and by RBHA.

Table 10: Adult Consumer Responses to Question 1

	Percent of Responses to Question 1:  What have been some of the most helpful things about the services you received over the last six months?											
RBHA	Counseling	ounseling Staff Psychiatrist Education Treatment General Satisfaction										
Statewide	17%	13%	20%	11%	23%	8%						
CPSA 3	18%	10%	26%	9%	24%	14%						
CPSA 5	16%	15%	23%	10%	26%	8%						
GSA-2	11%	12%	17%	9%	18%	7%						
NARBHA	23%	17%	24%	14%	28%	8%						
GSA-4	31%	16%	25%	13%	17%	12%						
ValueOptions	14%	12%	15%	10%	21%	6%						

Responses varied greatly between RBHAs. Common themes reflected in the responses to Question 1 "What have been some of the most helpful things about the services you received over the last six months?" included satisfaction with the treatment and/or counseling received, with the psychiatrist and/or non-clinical staff at the service sites, and the education the consumers received concerning different aspects of their illness and/or treatment. Many consumers expressed general satisfaction without stressing any particular aspect of their treatment experience.

Overall, in their responses to Question 2: "What would improve the services that you receive here?", consumers expressed satisfaction with the services received. Some consumers identified areas for improvement, as can be seen in the table below. While themes could be identified across RBHAs, the extent to which consumers expressed each theme varied greatly between RBHAs.

Table 11: Adult Consumer Responses to Question 2

	Percen	t of Res	ponses to (	Question 2:								
	What wo	What would improve the services that you receive here?										
RBHA	Satisfied	Commun ication	Appointment Availability	Appointment Frequency	Consistent Provider	Service Access	Individual Counseling	Staff on Time	Medication Information			
Statewide	32.5%	3.3%	3.8%	3.2%	3.6%	5.2%	5.8%	5.1%	5.3%			
CPSA 3	32.4%	2.4%	3.4%	4.3%	2.9%	5.3%	6.3%	4.8%	4.8%			
CPSA 5	23.1%	5.9%	6.8%	3.1%	7.6%	6.8%	8.5%	6.8%	7.3%			
GSA-2	62.8%	1.4%	2.8%	0.9%	0.5%	2.3%	3.3%	2.8%	2.8%			
NARBHA	28.4%	5.7%	1.4%	7.6%	1.4%	6.2%	5.7%	5.7%	5.7%			
GSA-4	42.6%	0.8%	0.8%	2.5%	0.8%	4.1%	4.1%	4.1%	4.9%			
Value Options	24.9%	2.1%	4.1%	1.9%	3.9%	5.2%	5.2%	5.2%	5.2%			

A third item was added in 2005 to give consumers an opportunity to provide open-ended feedback on any issue. As is reflected in the table below, only a small percent of the comments contained negative statements about staff or services. Most consumers chose to express their thankfulness for the services received or compliment treatment or non-clinical staff.

Table 12: Adult Consumer Responses to Question 3

	Percent of Responses to Question 3: Other comments?										
RBHA	Thankful for services	Satisfied with services	Services received - Positive	Services received - Negative	Staff - Positive	Staff - Negative					
Statewide	7.7%	4.0%	6.3%	1.8%	10.1%	3.0%					
CPSA 3	4.3%	5.3%	4.3%	1.9%	8.7%	2.4%					
CPSA 5	7.6%	6.2%	6.2%	2.5%	9.6%	5.1%					
GSA-2	7.9%	4.2%	4.7%	0.9%	7.9%	2.3%					
NARBHA	10.4%	3.8%	8.5%	0.9%	12.8%	3.8%					
GSA-4	10.7%	3.3%	11.5%	0%	13.9%	1.6%					
ValueOptions	7.1%	1.9%	5.8%	2.4%	9.9%	1.9%					

# Youth Services Survey for Families (YSS-F)

# Demographic Profile

A total of 1,193 completed surveys were included in the analysis.

The following paragraphs describe the demographic profile of the surveyed children/adolescents receiving behavioral health services and not the family member/guardian/adult companion who responded to the survey. In most cases, the survey was completed by a family member of the youth receiving services specifically, a parent/guardian (84%) or other relative (9%). Almost half of the respondents indicated that their family was involved in a Child and Family Team. About one-third of the responses reflect that the child had been receiving services for less than one year (0-3 months= 22%; 7-11 months= 14%). 15% had been receiving services for more than five years.

In terms of the surveyed youth where eligibility was completed eligibility status, 95% were Title XIX/XXI eligible; about 26% of the respondents left this item blank

Sixty-four percent (64%) are male and the majority is in the 4-12 age group, 39% are in the 13-17 age group, and 3% in the 0-3 age group. The graph below shows the distribution of the surveyed children/adolescents by age group.

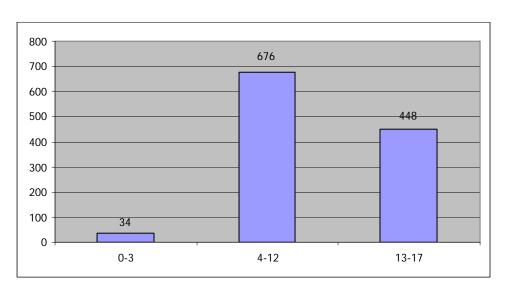


Figure 4: Age Distribution of YSS-F Respondents (Unit = Number of Respondents)

In terms of racial background, the surveyed children/adolescents have the following distribution: the majority of respondents are Caucasian (59%), followed by persons who did not declare a racial

category (22%). African-Americans represent 8%, American Indians 4%, and Asians and Native Hawaiians represented less than 1% of the respondents. 7% selected more than one race.

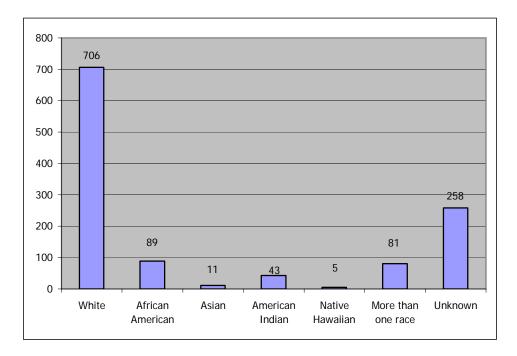


Figure 7: Surveyed Youth by Racial Distribution (Unit = Number of Respondents)

For the respondents' ethnicity, 59% reported as Non Hispanic or Latino descent.

#### Domain Analysis

A domain score is a composite score of the survey items that comprised a particular domain. For the Youth Services Survey for Families, the five domains differed (but with semblance of similarity) from those of the Adult Consumer Survey. The YSS-F domains are as follows: the Access domain includes questions pertaining to service location and time availability. The Satisfaction with Services (general satisfaction) domain includes questions on overall assessment of the service delivery system and service quality issues such as appropriateness of services and availability of needed services. The Outcomes domain includes questions on perception of functional/symptomatic improvements, social and family relationships, and coping abilities. The Participation in Treatment Planning domain is comprised of three questions pertaining to the use and solicitation of consumer/family input in developing the treatment plan, setting goals, and choice of service. The Cultural Sensitivity domain includes staff attitude and respect towards one's culture, beliefs, and practices.

The table below shows the number and percentage of respondents who either posted strongly agree or agree on the survey items falling under each domain.

Table 13: Statewide Domain Scores (YSS-F)

	Number of Positive Responses	Percent Responding Positively	Weighted Average Score	Confidence Interval*
Reporting Positively About Access	667	71.5	3.95	3.935-3.964
Reporting Positively About Cultural Sensitivity	870	91.6	4.328	4.318-4.338
Reporting Positively About Outcomes	657	60.2	3.663	3.652-3.675
Reporting Positively About Participation in Treatment Planning	918	83.6	4.095	4.085-4.102
Reporting Positively About General Satisfaction	830	74.1	3.963	3.952-3.974

<sup>\*</sup>Using a 95% confidence level. Score >3.5 implies positive response. The degree of agreement is stronger as the score approaches the value of 5.

The domain with the highest positive response was Cultural Sensitivity (92%), followed by Participation in Treatment Planning (84%). Similar to the findings of the Adult Consumer Survey, respondents' positive perception of Outcomes was the lowest (60%). General Satisfaction posted a positive response at 74%.

The table below shows the comparison of the domain scores by RBHA:

Table 14: RBHA Domain Scores (YSS-F)

			Domain		
RBHA	General Satisfaction	Access	Cultural Sensitivity	Outcomes	Participation in Treatment Planning
		Percent Resp	onding Positive	ely	
GSA-2	74%	71%	92%	65%	82%
ValueOptions	75%	72%	93%	61%	85%
NARBHA	79%	76%	88%	57%	83%
GSA-4	79%	78%	93%	62%	82%
CPSA 5	68%	61%	88%	59%	80%
CPSA 3	73%	86%	91%	59%	76%
Statewide	74%	72%	92%	60%	84%

NARBHA and GSA-4 posted the highest percent (79%) responding positively for the general satisfaction domain, followed by ValueOptions (75%), GSA-2 (74%), CPSA 3 (73%) and CPSA 5 (68)%. For the access domain, CPSA 3 was markedly above the statewide score of 72% with 86% positive responses. GSA-4 and NARBHA also exceeded the statewide score with 78% and 76% positive responses, respectively. All RBHAs posted high positive response for the cultural sensitivity domain, ranging from 93% for GSA-4 and ValueOptions, to 88% for NARBHA and CPSA 5. Participation in treatment planning was highest in ValueOptions (85%), while CPSA 3 received the lowest score (76%). For outcomes, all RBHAs have relatively low positive responses. GSA-2 reported the highest percent in this domain, at 65%, and NARBHA the lowest, with 57%.

# Item Analysis

Table 15 below shows the average score for each of the survey items, including the standard deviation and the percentage of participants who responded positively to the item.

Table 15: Survey Item Scores (YSS-F)

	Weighted Average	Standard	Percent Responding
Survey Item	Score	Deviation	Positively
Access:			
8. The location of services was convenient for us.	3.92	1.18	78%
9. Services were available at times that were convenient for us.	3.96	1.11	81%
General Satisfaction:			
Overall, I am satisfied with the services my child received.	4.17	1.00	86%
4. The people helping my child stuck with us no matter what.	4.03	1.08	78%
5. I felt my child had someone to talk to when he/she was troubled.	3.83	1.16	72%
7. The services my child and/or family received were right for us.	3.95	1.09	76%
10. My family got the help we wanted for my child.	3.94	1.08	77%
11. My family got as much help as we needed for my child.	3.88	1.09	73%
Planning/Involvement:			
2. I helped to choose my child's services.	4.02	0.97	84%
3. I helped to choose my child's treatment goals.	4.13	0.93	87%
6. I participated in my child's treatment.	4.17	0.95	87%
Cultural Sensitivity:			
12. Staff treated me with respect.	4.32	0.90	91%
13. Staff respected my family's religious/spiritual beliefs.	4.29	0.81	89%

14. Staff spoke with me in a way that I understood.	4.34	0.83	93%
15. Staff were sensitive to my cultural/ethnic			
background.	4.31	0.80	93%
Positive Outcomes of Services:			
16. My child is better at handling daily life.	3.85	1.05	71%
17. My child gets along better with family members.	3.70	1.06	65%
18. My child gets along better with friends and other			
people.	3.73	1.06	67%
19. My child is doing better in school and/or work.	3.72	1.16	67%
20. My child is better able to cope when things go			
wrong.	3.54	1.09	58%
21. I am satisfied with our family life right now.	3.49	1.20	57%

The three survey items with the highest percentage of respondent agreement, from highest to lowest, are as follows:

- #14. Staff spoke with me in a way that I understood. (93%; Cultural Sensitivity) and
- #15. Staff were sensitive to my cultural/ethnic background (93%; Cultural Sensitivity)
- #12. Staff treated me with respect. (91%; Cultural Sensitivity)
- #13. Staff respected my family's religious/spiritual beliefs. (89%; Cultural Sensitivity)

The three survey items with the lowest percentage of respondent agreement, from lowest to highest, are as follows:

- #21. I am satisfied with our family life right now. (57%; Outcomes)
- #20. My child is better able to cope when things go wrong. (58%; Outcomes)
- #17. My child gets along better with family members. (65%; Outcomes)

# Subgroup Analysis

This section discusses the results of the survey in light of the surveyed children/adolescents' demographic characteristics - race, ethnicity, age group, and gender. As may be observed in the tables and graphs presented, variations within subgroups exist.

Table 16 shows statewide domain scores by racial category. Due to the low number of responses from Asian and Native Hawaiian survey participants, these groups could not be included in any comparisons.

Table 16: Statewide Domain Scores by Race (YSS-F)

							Ra	ace								
		American Indian		1		ian	African American		Native Hawaiian		Caucasian		More Than One Race		Unknown	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%		
Reporting Positively About Access	NA	NA	NA	NA	55	74%	NA	NA	400	69%	35	66%	149	82%		
Reporting Positively About Cultural Sensitivity	32	90%	NA	NA	66	89%	NA	NA	520	92%	54	93%	189	93%		
Reporting Positively About Outcomes	NA	NA	NA	NA	45	57%	NA	NA	375	56%	49	70%	158	72%		
Reporting Positively About Participation in Treatment Planning	33	87%	NA	NA	67	81%	NA	NA	549	84%	66	84%	189	85%		
Reporting Positively About General Satisfaction	30	75%	NA	NA	65	78%	NA	NA	490	72%	57	74%	179	80%		

Note: NA means n < 30.

Table 16 above shows that African American respondents posted higher percent positive responses than Caucasian respondents in regard to Access, and higher than Caucasian or American Indian respondents in the area of General Satisfaction. African American respondents posted the lowest satisfaction compared to the other groups for the Cultural Sensitivity and Participation in Treatment Planning domains. Again, Outcomes were ranked the least positively for all groups with only 56% of Caucasians responding positively.

The table below presents the domain scores by the surveyed children/adolescents' ethnic background.

Table 17: Statewide Domain Scores by Ethnicity (YSS-F)

	Ethnicity					
	Hispani	c/Latino	Not Hispanic/Latino			
	#	%	#	%		
Reporting Positively About Access	266	78%	346	68%		
Reporting Positively About Cultural Sensitivity	347	91%	460	93%		
Reporting Positively About Outcomes	274	69%	340	57%		
Reporting Positively About Participation in Treatment Planning	345	85%	513	83%		
Reporting Positively About General Satisfaction	330	81%	436	71%		

Responses from families of Hispanic/Latino descent were generally more positive than those from families of Non-Hispanic/Latino descent, with the exception of the cultural sensitivity domain, where Non-Hispanic/Latino respondents posted a slightly higher percentage of positive responses. For both groups, the Cultural Sensitivity domain was rated highest, while the Outcomes domain was rated lowest. The Outcomes domain showed the largest difference between Hispanic/Latino (69% positive) and Non-Hispanic/Latino (57% positive) responses.

Data from Table 18 below shows the percent of positive responses by gender across domains, reflecting higher satisfaction for female respondents. The largest difference between the two genders was in the Outcomes domain. No difference between genders can be observed for the General Satisfaction domain.

Table 18: Statewide Domain Scores by Gender (YSS-F)

		Gender				
	IV	lale	Female			
	#	%	#	%		
Reporting Positively About Access	399	71%	222	73%		
Reporting Positively About Cultural Sensitivity	534	91%	279	94%		
Reporting Positively About Outcomes	393	59%	228	66%		
Reporting Positively About Participation in Treatment Planning	546	83%	311	84%		
Reporting Positively About General Satisfaction	496	74%	277	74%		

Due to the low number of responses in the 0-3 age category, comparisons include only the 4-12 and 13-17 age groups. Families of older youth expressed somewhat lower levels of satisfaction than those of younger children/adolescents. This difference was the strongest in the Outcomes domain, where 63% of the 4-12 age group responded positively, versus 56% of the 13-17 age group. No difference was observed in the Cultural Sensitivity domain, where both groups posted the highest percentage of positive responses (92%).

Table 19: Statewide Domain by Age Group (YSS-F)

	Age Group							
	0	-3	4-	12	13-17			
	#	%	#	%	#	%		
Reporting Positively About Access	NA	NA	375	72%	258	70%		
Reporting Positively About Cultural Sensitivity	NA	NA	508	92%	322	92%		
Reporting Positively About Outcomes	NA	NA	388	63%	236	56%		
Reporting Positively About Participation in Treatment Planning	NA	NA	530	84%	344	82%		
Reporting Positively About General Satisfaction	NA	NA	472	74%	310	73%		

Note: NA means n < 30.

# Thematic Analysis: Written Comments

Similar to the Adult Consumer Survey, the same three open-ended questions were asked in the Youth Services Survey for Families.

What have been some of the most helpful things about the services you and your child received over the last 6 months?

What would improve the services that you and your child receive here?

Other Comments?

The same methodology as for the Adult Consumer Survey was used in analyzing the comments. Comments were tabulated and classified into positive and negative comments. They were then reviewed for presence of themes. A total of 1,063 surveys with responses to open-ended questions were analyzed (CPSA 3: n=152; CPSA 5: n=269; GSA-2: n=128; NARBHA: n=137; GSA-4: n=108; and ValueOptions: n=269). Tables 20 – 22 show the percentage of responses by thematic category statewide and by RBHA.

As was seen in the comments on the Adult Consumer Survey, responses varied greatly between RBHAs.

For Question 1: "What have been some of the most helpful things about the services you and your child received over the last six months?" several themes emerged. The treatment and counseling services received were most frequently cited as the most helpful aspects. Psychiatrists, non-clinical staff, education, and support were also noted. Medication ranked lowest among most RBHAs, but was mentioned in 10% of the ValueOptions responses.

Table 20: YSS-F Responses to Question 1

	Percent of Responses to Question 1:								
RBHA	What have been some of the most helpful things about the services you and your child received over the last six months?								
	Counseling Staff Psychiatrist Medication Support Education Treatment Satisfied								
Statewide	20%	11%	17%	6%	8%	10%	20%	11%	
CPSA 3	14%	10%	14%	6%	8%	13%	25%	18%	
CPSA 5	21%	10%	22%	8%	10%	11%	18%	11%	
GSA-2	16%	16%	19%	3%	6%	7%	26%	11%	
NARBHA	28%	12%	18%	2%	12%	10%	19%	10%	
GSA-4	28%	14%	17%	3%	7%	13%	10%	13%	
Value Options	18%	8%	14%	10%	7%	9%	19%	8%	

In their responses on Question 2: "What would improve the services that you and your child receive here?" consumers for the most part expressed satisfaction with the services received. Some consumers identified areas for improvement. Appointment availability and frequency, access to services and individual counseling in particular, as well as the need for medication information and greater timeliness on the part of the staff were identified as areas for improvement. While themes could be identified across RBHAs, the extent to which consumers expressed each theme varied between RBHAs, as can be seen in the table below.

Table 21: YSS-F Responses to Question 2

Percent of Responses to Question 2:  What would improve the services that you and your child receive he						ere?	
RBHA	Satisfied with Services	Appointment Availability	Appointment Frequency	Access to Services	Individual Counseling	Staff on Time	Medication Information
Statewide	30.0%	4.3%	4.8%	5.0%	4.7%	4.3%	5.1%
CPSA 3	26.0%	6.5%	4.5%	5.8%	7.8%	5.8%	7.1%
CPSA 5	28.3%	7.1%	5.2%	5.2%	4.1%	4.5%	5.2%
GSA-2	60.2%	2.3%	5.5%	6.3%	6.3%	6.3%	7.0%
NARBHA	29.9%	2.2%	3.6%	5.1%	4.4%	3.6%	4.4%
GSA-4	40.7%	3.7%	6.5%	4.6%	2.8%	2.8%	2.8%
Value Options	15.5%	2.6%	4.1%	3.7%	3.7%	3.3%	4.1%

A third item was added in 2005 to give consumers an opportunity to provide open-ended feedback on any issue. As is reflected in the table below, most consumers who completed this item chose to express their thankfulness for the services received or complimented treatment or non-clinical staff.

Table 19: YSS-F Responses to Question 3

	Percent of Responses to Question 3: Other comments?								
RBHA	Thankful for services	Satisfied	Services received - Positive	Services received - Negative	Staff - Positive	Staff - Negative			
Statewide	7.0%	3.3%	7.4%	2.4%	8.0%	2.0%			
CPSA 3	11.7%	2.6%	6.5%	1.9%	9.1%	1.9%			
CPSA 5	6.7%	4.1%	5.2%	4.8%	9.3%	3.3%			
GSA-2	4.7%	4.7%	7.8%	4.7%	5.5%	3.1%			
NARBHA	8.0%	3.6%	10.9%	0.7%	11.7%	0.7%			
GSA-4	7.4%	2.8%	9.3%	0.9%	7.4%	0.0%			
ValueOptions	5.2%	2.2%	7.4%	0.7%	5.5%	1.5%			

#### State-Added Questions

# Adult Consumer Survey

In addition to the MHSIP core survey items, the following items were added to the Adult Consumer Survey. These additional items were scored in the same manner as the core items, using a five-point Likert scale.

Medication - Decisions: I understand why my doctor recommended medications for me.

Medication - Education: My doctor told me about the possibility of important side effects.

Medication - Communication: My doctor answered my questions about my medication in a way

that I understand.

Member Advocacy: Member advocacy services (education, referral, and assistance

with member concerns and complaints) were made available to

me.

Cultural Competency: My cultural preferences and race/ethnicity were included in

planning the services I received.

A total of 1,350 completed surveys were analyzed (CPSA 3: n=233; CPSA 5: n=349; GSA-2: n=143; NARBHA: n=203; GSA-4: n=132; and ValueOptions: n=290). The following table shows number and percent reporting positively for each of the state-added questions, statewide and by RBHA.

Table 23: Percent of Positive Responses to State-Added Questions – Adult Consumer Survey

RBHA	Percent Reporting Positively to Adult Consumer Survey State-Added Questions							
КОПА	Medication- Decisions	Medication- Side Effect Education	Medication- Communication	Member Advocacy	Cultural Competency			
Statewide	86%	79%	83%	71%	60%			
CPSA 3	87%	84%	86%	71%	65%			
CPSA 5	83%	77%	80%	68%	59%			
GSA-2	91%	87%	81%	64%	55%			
NARBHA	89%	84%	86%	71%	61%			
GSA-4	76%	76%	84%	80%	75%			
ValueOptions	87%	77%	83%	72%	59%			

Statewide and for most RBHAs (GSA-4 being the exception), the item with the highest percent reporting positively was the question "I understand why my doctor recommended medications for me.", followed closely by the item "My doctor answered my questions about my medication in a way that I understand". The item relating to cultural competency received the lowest percent positive responses across all RBHAs. For the item relating to the availability of member advocacy services, GSA-4 received the highest score of all RBHAs (80% as compared to 71% statewide).

# Youth Survey

In addition to the MHSIP core survey items, the following items were added to the YSS-F. These additional items were scored in the same manner as the core items, using a five-point Likert scale. Following the domain score approach for the MHSIP core items, some of the state-added questions were combined to yield a summary score (items 25,26, and 27 for the Child and Family Team; items 28 and 29 for the Support Services; and items 31,32,and 33 for Medication).

Appropriate Grade Level: My child is enrolled at the appropriate grade level in school.

Stable Living Situation: My child has remained stable in his/her living situation for the

past year.

Avoiding Delinquency: My child is staying out of trouble with the law.

Cultural Competency: Our family's cultural preferences and race/ethnicity were

included in planning services that my child/family receive.

Support Services: The treatment team has helped us find people in the community

to help support our needs.

Member advocacy services (education, referral and assistance with member concerns and complaints) were made available for

my child/family.

Child and Family Team: Our family and other important friends are a part of the team in

my child's treatment plan.

I am satisfied with the support my family receives from our child

and family team.

Timely support has been available to handle crisis situations.

Medication: I understand why our doctor recommended medications for my

child.

My child's doctor told me about the possibility of important side

effects.

My child's doctor answered questions about my child's

medication in a way that I understood.

A total of 1,193 completed surveys were analyzed (CPSA 3: n=181; CPSA 5: n=319; GSA-2: n=128; NARBHA: n=167; GSA-4: n=129; and ValueOptions: n=269). The following tables show number and percent reporting positively for the state-added questions, statewide and by RBHA.

Statewide and for most RBHAs, the highest percent of positive responses were received for the questions relating to informed consent for medications and the child/adolescent avoiding delinquency. The item about the child being in a stable living situation showed the least variation across RBHAs, with scores ranging from 63% - 69%. Availability of support services reflected the largest variation in RBHA scores, with the percent reporting positively ranging from 48% for CPSA 5 to a high of 77% for CPSA 3. ValueOptions received the highest percent positive responses for four of the seven areas: appropriate grade level (84%), stable living situation (tied with CPSA 5 at 69%), avoiding delinquency (90%), and medication-related items (89%).

Table 24: Percent of Positive Responses to State-Added Questions - YSS-F

RBHA	Percent Reporting Positively to YSS-F State-Added Questions								
KDHA	Appropriate Grade Level	Stable Living Situation	Avoiding Delinquency	Cultural Competence	Child and Family Team	Support Services	Medication		
Statewide	82%	68%	88%	73%	64%	58%	88%		
CPSA 3	76%	63%	83%	76%	71%	77%	85%		
CPSA 5	81%	69%	84%	69%	64%	48%	87%		
GSA-2	71%	63%	82%	63%	57%	67%	80%		
NARBHA	79%	65%	86%	77%	65%	60%	88%		
GSA-4	78%	64%	88%	75%	72%	64%	80%		
Value Options	84%	69%	90%	74%	64%	57%	89%		

Results for Question 34: "Did you give consent for prescribing medication to your child?" can be seen in the table below. The denominator for calculation of the percentages is based on the total number of responses to question 34 (statewide n=1,033) minus those that responded *NA- not given medication* (statewide n= 211, 20% of respondents).

Statewide, in cases where the child had received medication, answered that they did give consent for prescribing medication to their child, 9% responded that they did not, and 5% of respondents did not know whether they gave consent or not. NARBHA posted the highest score with 93% "Yes" responses, while GSA-2 posted the lowest with only 80% responding affirmatively to this item. The remaining RBHAs had scores in the 85% - 88% range.

Table 25: Results for State-Added Question # 34

RBHA	Percent Responses to YSS-F State-Added Question 34:  Did you give consent for prescribing medication to your child?				
	Yes	No	Don't know		
Statewide	86%	9%	5%		
CPSA 3	86%	11%	3%		
CPSA 5	85%	8%	8%		
GSA-2	80%	17%	3%		
NARBHA	93%	3%	4%		
GSA-4	85%	12%	3%		
ValueOptions	88%	6%	6%		

#### TITLE XIX/XXI SURVEY ANALYSIS

This section analyzes the results of the statewide survey using data for Title XIX/XXI respondents only. Although it is anticipated that the findings of this section are not significantly different from the discussion of the overall survey results (combined Title XIX/XXI and Non-Title XIX/XXI), this special analysis is included to provide focused discussion of the survey results from Medicaid clients.

# **Adult Consumer Survey**

# Demographic Profile

Eighty percent (n = 895) of the Adult Consumer Survey respondents were Title XIX/XXI eligible. In terms of gender, eleven percent of the survey respondents left this survey item blank. Of those that responded, most were female, as shown in the graphic below.

Female 63%

Figure 6: Gender Distribution of TXIX/XXI Adult Respondents

The race breakdown of the survey respondents is depicted below. As shown in the graphic below, the majority of respondents were Caucasian.

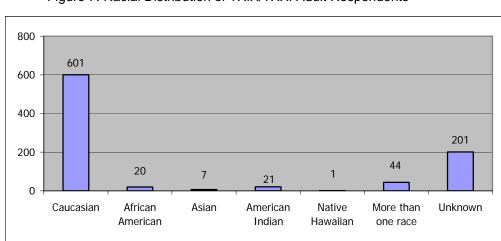


Figure 7. Racial Distribution of TXIX/TXXI Adult Respondents

In terms of ethnicity, thirteen percent of the survey respondents left this survey item blank. Of those that responded, 69% identified their ethnicity as Non-Hispanic or Latino, while 31% indicated they were of Hispanic or Latino descent.

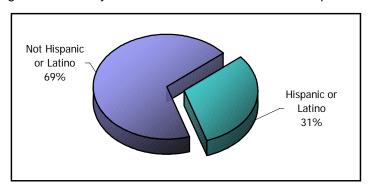


Figure 8: Ethnicity Distribution of TXIX/TXXI Adult Respondents

With respect to program source, 40% of the Title XIX/XXI respondents were categorized as Seriously Mentally III (SMI), while 60% were non-SMI (see Figure 10 below).

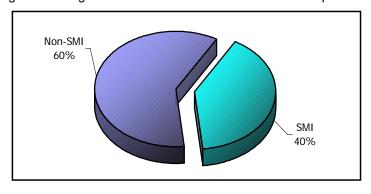


Figure 9: Program Distribution of TXIX/TXXI Adult Respondents

Figure 11 shows that most respondents were between the ages of 46 - 64 (37%), followed by 31-45 year olds (35%), and those aged 21-30 (18%).

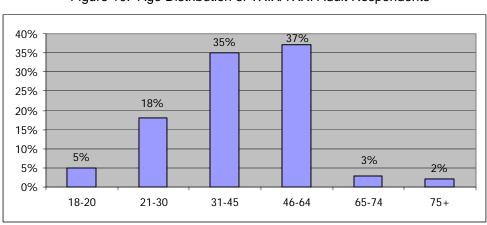


Figure 10: Age Distribution of TXIX/TXXI Adult Respondents

# **Domain Analysis**

The percentage of respondents with positive responses varied across the five domains as shown in the table below. The domain with the lowest percent responding positively was the Outcomes domain, with only 62% of positive responses. The domains with the highest percent responding positively were those of Quality/Appropriateness (84%) and General Satisfaction (80%).

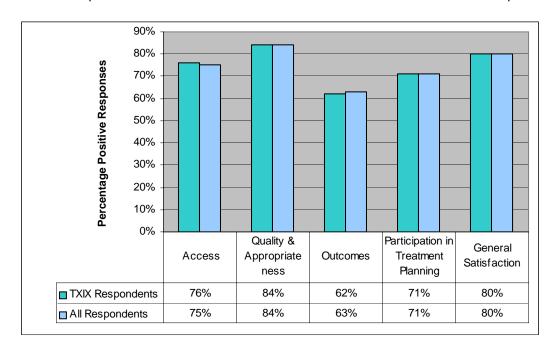
Table 26: Statewide TXIX/TXXI Domain Scores (Adult Consumer Survey)

	Number of Positive Responses	Percent Responding Positively
Reporting Positively About Access	648	76%
Reporting Positively About Quality/Appropriateness	694	84%
Reporting Positively About Outcomes	519	62%
Reporting Positively About Participation in Treatment Planning	563	71%
Reporting Positively About General Satisfaction	683	80%

Note: Number of responses correlate to surveys while percentages relate to weighted data.

Comparing the Title XIX/XXI domain scores to the overall respondent domain scores, there was little difference, as shown in the table below.

Table 27: Comparison of Domain Scores - TXIX/XXI and Overall Statewide Adult Respondents



The adult TXIX/XXI survey population domain scores by RBHA are shown in Table 28 below. For each RBHA, the Quality/Appropriateness domain received the highest percentage of positive responses, while the Outcomes domain was rated the lowest consistently among all RBHAs. Across domains, CPSA 5 clients had the lowest levels of positive responses. GSA-4 clients had the highest positive response on three of the five domains (Access, Quality/Appropriateness, and Outcomes).

Table 28: RBHA TXIX/TXXI Domain Scores (Adult Consumer Survey)

			Domain								
RBHA	General Satisfaction	Access	Quality and Appropriateness	Outcomes	Participation in Treatment Planning						
Percent Responding Positively											
GSA-2	86%	81%	91%	71%	84%						
ValueOptions	90%	85%	92%	66%	71%						
NARBHA	83%	77%	85%	61%	72%						
GSA-4	83%	93%	94%	79%	81%						
CPSA 5	72%	66%	75%	55%	64%						
CPSA 3	77%	74%	87%	69%	75%						
Statewide	80%	76%	84%	62%	71%						

#### Item Analysis

The three survey items with the highest percentage of respondent agreement, from highest to lowest, are as follows:

- #13. I was given information about my rights. (89%; Quality/Appropriateness)
- #16. Staff respected my wishes about who is and who is not to be given information about my treatment. (88%; Quality/Appropriateness)
- #11. I felt comfortable asking questions about my treatment and medication. (86%; Participation in Treatment Planning)

The three survey items with the lowest percentage of respondent agreement, from lowest to highest, are as follows:

- #26. I do better in school and/or work. (57%; Outcomes)
- #25. I do better in social situations. (61%; Outcomes) and
- #27. My housing situation has improved. (61%; Outcomes)
- #28. My symptoms are not bothering me as much. (62%; Outcomes)

Table 29: TXIX/TXXI Survey Item Scores (Adult Consumer Survey)

	Weighted Average	Standard	Percent Responding
Survey Item	Score	Deviation	Positively
General Satisfaction:			
I like the services that I received here.	4.08	1.06	82%
2. If I had other choices, I would still get services from this			
agency.	4.01	1.07	79%
3. I would recommend this agency to a friend or family	4.40	4.00	0.40/
member.  Perception of Access:	4.13	1.02	84%
•			
4. The location of the services was convenient (parking, public transportation, distance, etc.)	3.95	1.13	77%
5. Staff were willing to see me as often as I felt it was	0.00	1.10	1170
necessary.	4.08	1.07	82%
6. Staff returned my calls in 24 hours.	3.87	1.17	74%
7. Services were available at times that were good for me.	4.11	1.00	83%
8. I was able to get all the services I thought I needed.	3.93	1.16	77%
9. I was able to see a psychiatrist when I wanted to.	3.66	1.20	66%
Participation in Treatment Planning:			
11. I felt comfortable asking questions about my treatment			
and medication.	4.19	0.94	86%
17. I, not staff, decided my treatment goals.	3.84	1.08	70%
Quality/Appropriateness:			
10. Staff here believe that I can grow, change and recover.	4.13	0.93	83%
12. I feel free to complain.	4.01	1.03	78%
13. I was given information about my rights.	4.21	0.93	89%
14. Staff encouraged me to take responsibility for how I live my life.	4.15	0.91	85%
15. Staff told me what side affects to watch out for.	4.01	1.06	79%
16. Staff respected my wishes about who is and who is not to be given information about my treatment.	4.27	0.87	88%
18. Staff were sensitive to my cultural background (race, religion, language, etc.).	4.09	0.91	80%
19. Staff helped me obtain the information I needed so that I could take charge of my managing my illness.	4.03	0.98	81%
20. I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	3.99	1.02	78%
Outcomes:			
21. I deal more effectively with daily problems.	3.86	1.10	73%
22. I am better able to control my life.	3.83	1.04	72%
23. I am better able to deal with crisis.	3.74	1.11	68%
24. I am getting along better with my family.	3.78	1.07	71%
25. I do better in social situations.	3.58	1.15	61%
26. I do better in school and/or work.	3.50	1.20	57%
27. My housing situation has improved.	3.65	1.17	61%
28. My symptoms are not bothering me as much.	3.58	1.18	62%

## Subgroup Analysis

Table 30 shows the TXIX/XXI adult domain scores by race. Due to low numbers of valid responses from survey respondents who indicated a single race other than Caucasian, domain scores could be reported only for Caucasian TXIX/XXI respondents. For those domains where the percent of respondents with more than one race reporting positively is available, their scores are lower than the scores for Caucasian respondents for Access, Quality/Appropriateness of services, but higher for General Satisfaction.

Table 30: Statewide TXIX/TXXI Domain Scores by Race (Adult Consumer Survey)

		Race												
		American Asian Indian		ian	African American		Native Hawaiian		Caucasian		More Than One Race		Unknown	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Reporting Positively About Access	NA	NA	NA	NA	NA	NA	NA	NA	433	76%	31	66%	151	82%
Reporting Positively About Quality/Appropriateness	NA	NA	NA	NA	NA	NA	NA	NA	482	85%	30	80%	144	84%
Reporting Positively About Outcomes	NA	NA	NA	NA	NA	NA	NA	NA	350	62%	NA	NA	125	69%
Reporting Positively About Participation in Treatment Planning	NA	NA	NA	NA	NA	NA	NA	NA	395	72%	NA	NA	116	75%
Reporting Positively About General Satisfaction	NA	NA	NA	NA	NA	NA	NA	NA	467	81%	36	87%	147	79%

Note: NA means n < 30.

Table 31 shows the domain scores stratified by ethnicity. While the percent of clients responding positively did not differ significantly depending on ethnicity, Non-Hispanic/Latino respondents rated two of the five domains (Access and Outcomes) somewhat higher.

Table 31: Statewide TXIX/TXXI Domain Scores by Ethnicity (Adult Consumer Survey)

	Ethnicity								
	Hispani	c/Latino	Not Hispanic/Latin						
	#	%	#	%					
Reporting Positively About Access	174	78%	393	75%					
Reporting Positively About Quality/Appropriateness	184	85%	435	85%					
Reporting Positively About Outcomes	145	66%	314	61%					
Reporting Positively About Participation in Treatment Planning	141	71%	357	71%					
Reporting Positively About General Satisfaction	183	81%	420	81%					

Table 32 shows the percent of positive responses for each domain by respondents' gender. Males have slightly higher positive responses for four of the five domains (Access, Quality/Appropriateness, Participation in Treatment Planning, and General Satisfaction), while for female clients outcomes were rated more favorably.

Table 32: Statewide TXIX/TXXI Domain Scores by Gender (Adult Consumer Survey)

	Gender							
	Ma	ale	Fe	male				
	#	%	#	%				
Reporting Positively About Access	225	79%	365	76%				
Reporting Positively About Quality/Appropriateness	241	87%	392	84%				
Reporting Positively About Outcomes	172	58%	296	65%				
Reporting Positively About Participation in Treatment Planning	185	72%	327	71%				
Reporting Positively About General Satisfaction	230	80%	396	82%				

The table below shows that the age concentration of respondents is from 21-64 years old. Due to the low number of valid cases for the 65-74 and 75+ age groups and for most domains in the 18-20 age group, these data were not analyzed. Overall, there was little difference between respondents in the age groups of 31-45 and 46-64. They posted higher percentage of positive responses for Quality/Appropriateness and General Satisfaction compared to those in the younger age groups. Respondents age 21-30 had the highest percentage of positive responses for Participation in Treatment Planning. The Outcomes domain was rated lowest across all age groups.

Table 33: Statewide TXIX/TXXI Domain Scores by Age Group (Adult Consumer Survey)

	Age Group											
	18	18-20		21-30		31-45		46-64		65-74		5+
	#	%	#	%	#	%	#	%	#	%	#	%
Reporting Positively About Access	NA	NA	118	76%	231	76%	242	77%	NA	NA	NA	NA
Reporting Positively About Quality/Appropriateness	30	72%	122	80%	250	86%	266	86%	NA	NA	NA	NA
Reporting Positively About Outcomes	NA	NA	96	63%	187	63%	191	61%	NA	NA	NA	NA
Reporting Positively About Participation in Treatment Planning	NA	NA	103	75%	206	70%	213	71%	NA	NA	NA	NA
Reporting Positively About General Satisfaction	NA	NA	115	73%	242	82%	264	82%	NA	NA	NA	NA

Note NA means n<30

# Youth Services Survey for Families (YSS-F)

For 26% of the completed YSS-F surveys, the survey item about TXIX/XXI eligibility was left blank. Of those that responded, 95% reported being TXIX/TXXI clients. Therefore, no significant differences in results, compared to the statewide YSS-F combined TXIX/XXI and Non TXIX/XXI respondents, are expected.

# Demographic Profile

The majority of the respondents were male, as shown in the graphic below.

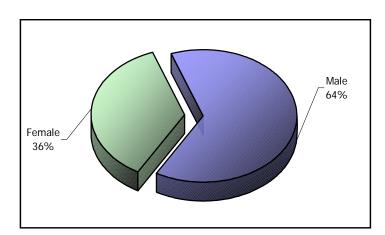


Figure 11: Gender Distribution of TXIX/XXI Surveyed Youth

The race breakdown of the clients is depicted below. As shown, the majority of respondents were Caucasian. In terms of ethnicity, eight percent of respondents left this survey item blank. Of those who responded, 58% identified themselves as Non-Hispanic or Latino descent, while 42% indicated they were of Hispanic or Latino descent.

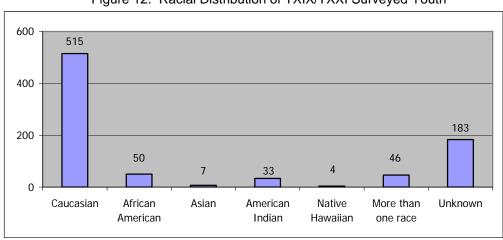


Figure 12: Racial Distribution of TXIX/TXXI Surveyed Youth

Figure 13 shows that most respondents were between the ages of 4-12 (60%), followed by 13-17 year olds (38%). Those aged 0-3 comprised only 2% of the total Title XIX/XXI surveyed youth.

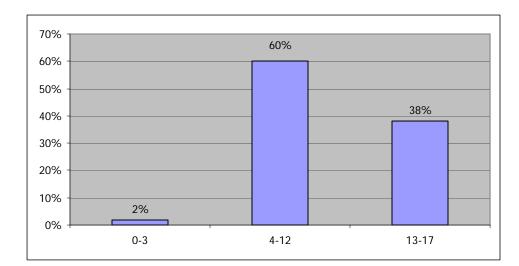


Figure 13: Age Group Distribution of TXIX/TXXI Surveyed Youth

#### Domain Analysis

The percent responding positively varied across the five domains as shown in the table below. The domain with the lowest percent reporting positively was the Outcomes domain, with only 60%. The domains with the highest percent reporting positively were those of Cultural Sensitivity (91%) and Participation in Treatment Planning (83%).

Number of **Positive** Percentage Responses Percent Reporting Positively About Access 472 72% 91% Percent Reporting Positively About Cultural Sensitivity 623 Percent Reporting Positively About Outcomes 469 60% Percent Reporting Positively About Participation in **Treatment Planning** 644 83%

74%

583

Table 34: Statewide TXIX/TXXI Domain Scores (YSS-F))

Note: Number of responses correlate to surveys while percentages relate to weighted data.

Percent Reporting Positively About General Satisfaction

There was no difference found when comparing the Title XIX/XXI domain scores to the overall respondent domain scores, as shown below.

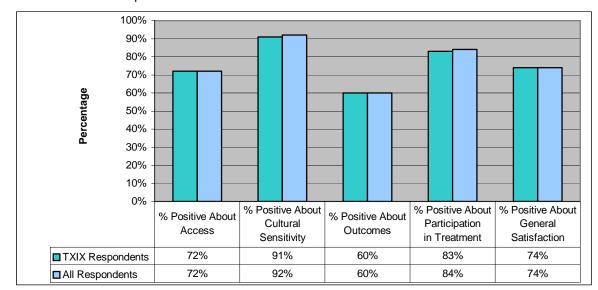


Table 35: Comparison of Domain Scores - TXIX YSS-F and Overall Statewide Results

The YSS-F TXIX/XXI domain scores by RBHA are shown in Table 36 below. Overall, the Outcomes domain was consistently rated the lowest among all RBHAs, while Cultural Sensitivity was rated the highest. For two of the five domains, CPSA 5 clients had the lowest percent of positive responses (General Satisfaction and Access), while CPSA 3 had the lowest score for the Outcomes and the Participation in Treatment Planning domains. GSA-2 had the highest percent responding positively on two of the five domains (Cultural Sensitivity and Outcomes).

Domain Participation in General Cultural Treatment **RBHA** Satisfaction Access Sensitivity **Outcomes** Planning Percent Responding Positively GSA-2 73% 68% 96% 68% 84% ValueOptions 75% 73% 91% 59% 86% NARBHA 81% 78% 89% 60% 86% GSA-4 82% 79% 76% 92% 62% CPSA 5 70% 63% 90% 61% 81% CPSA 3 72% 85% 92% 58% 77% Statewide 74% 72% 91% 60% 83%

Table 36: RBHA TXIX/TXXI Domain Scores (YSS-F)

# Item Analysis

Table 37: TXIX/TXXI Survey Item Scores (YSS-F)

Survey Item	Weighted Average Score	Standard Deviation	Percent Responding Positively
Access:			
8. The location of services was convenient for us.	3.89	1.15	78%
9. Services were available at times that were convenient for us.	3.96	1.08	81%
General Satisfaction:			
Overall, I am satisfied with the services my child received.	4.17	0.98	87%
The people helping my child stuck with us no matter what.	4.01	1.08	78%
5. I felt my child had someone to talk to when he/she was troubled.	3.87	1.14	73%
7. The services my child and/or family received were right for us.	3.96	1.07	77%
10. My family got the help we wanted for my child.	3.95	1.03	77%
11. My family got as much help as we needed for my child.	3.89	1.09	74%
Planning/Involvement:			
2. I helped to choose my child's services.	4.02	0.96	85%
3. I helped to choose my child's treatment goals.	4.15	0.91	87%
6. I participated in my child's treatment.	4.17	0.95	87%
Cultural Sensitivity:			
12. Staff treated me with respect.	4.34	0.88	91%
13. Staff respected my family's religious/spiritual beliefs.	4.26	0.81	88%
14. Staff spoke with me in a way that I understood.	4.20	0.83	94%
15. Staff were sensitive to my cultural/ethnic background.	4.24	0.83	91%
Positive Outcomes of Services:			
16. My child is better at handling daily life.	3.80	1.06	68%
17. My child gets along better with family members.	3.69	1.07	65%
18. My child gets along better with friends and other people.	3.75	1.02	68%
19. My child is doing better in school and/or work.	3.70	1.17	66%
20. My child is better able to cope when things go wrong.	3.50	1.09	56%
21. I am satisfied with our family life right now.	3.43	1.19	56%

The three survey items with the highest percentage of respondent agreement, from highest to lowest, are as follows:

- #14. Staff spoke with me in a way that I understood. (94%; Cultural Sensitivity)
- #12. Staff treated me with respect. (91%; Cultural Sensitivity) and
- #15. Staff were sensitive to my cultural/ethnic background. (91%; Cultural Sensitivity)
- #13. Staff respected my family's religious/spiritual beliefs. (88%; Cultural Sensitivity)

The three survey items with the lowest percentage of respondent agreement, from lowest to highest, are as follows:

- #21. I am satisfied with our family life right now. (56%; Outcomes) and
- #20. My child is better able to cope when things go wrong. (56%; Outcomes)
- #17. My child gets along better with family members. (65%; Outcomes)
- #19. My child is doing better in school and/or work. (66%; Outcomes)

## Subgroup Analysis

Table 38 shows the TXIX/TXXI youth domain scores by race. Due to the low number of valid responses from American Indian, Asian and Native Hawaiian respondents, these groups could not be included in any comparisons. Caucasian respondents expressed higher satisfaction than African American respondents in the areas of Access, Cultural Sensitivity, and Participation in Treatment Planning. African Americans reported higher general satisfaction than Caucasian respondents.

Table 38: Statewide TXIX/TXXI Domain Scores by Race (YSS-F)

							Ra	ace							
		merican A		Asian		African American		Native Hawaiian		Caucasian		More Than One Race		Unknown	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	
Reporting Positively About Access	NA	NA	NA	NA	31	69%	NA	NA	297	73%	NA	NA	102	76%	
Reporting Positively About Cultural Sensitivity	NA	NA	NA	NA	36	86%	NA	NA	390	92%	31	87%	136	92%	
Reporting Positively About Outcomes	NA	NA	NA	NA	NA	NA	NA	NA	281	56%	31	75%	109	73%	
Reporting Positively About Participation in Treatment Planning	NA	NA	NA	NA	37	78%	NA	NA	403	84%	37	83%	131	82%	
Reporting Positively About General Satisfaction	NA	NA	NA	NA	37	78%	NA	NA	361	73%	34	77%	122	75%	

Note: NA means n < 30.

Table 39 shows the YSS-F TXIX/TXXI domain scores stratified by ethnicity. Hispanic/Latino respondents have higher positive response in regard to access to services, outcomes, and general satisfaction, but lower satisfaction in regard to Cultural Sensitivity. The largest difference within a subgroup difference was found in the Outcomes domain, with respondents of Hispanic or Latino descent reporting a higher percentage of positive responses than respondents of Non Hispanic/Latino descent (67% and 57% respectively).

Table 39: Statewide TXIX/TXXI Domain Scores by Ethnicity (YSS-F)

		Ethnicity							
	Hispani	c/Latino	Not Hispanic/Latir						
	#	%	#	%					
Reporting Positively About Access	192	74%	245	70%					
Reporting Positively About Cultural Sensitivity	255	89%	326	91%					
Reporting Positively About Outcomes	197	67%	242	57%					
Reporting Positively About Participation in Treatment Planning	249	84%	359	84%					
Reporting Positively About General Satisfaction	232	77%	311	73%					

Table 40 shows the domain scores by gender. Females responded more positively across all five domains, with the largest difference in the Outcomes domain, where 69% of female respondents reported positively, as compared to 58% of male respondents.

Table 40: Statewide TXIX/TXXI Domain Scores by Gender (YSS-F)

	Gender						
	Ma	ale	Fen	nale			
	#	%	#	%			
Reporting Positively About Access	281	70%	162	75%			
Reporting Positively About Cultural Sensitivity	385	90%	197	91%			
Reporting Positively About Outcomes	280	58%	163	69%			
Reporting Positively About Participation in Treatment Planning	389	83%	217	85%			
Reporting Positively About General Satisfaction	348	73%	196	77%			

Table 41 shows the YSS-F TXIX/XXI domain scores by age group. Due to the low number of respondents in the 0-3 age category, analysis only included the 4-12 and 13-17 age groups. Clients in the age group of 4-12 generally have a higher percent responding positively than those in the older age category. For both age groups, Cultural Sensitivity was rated most positively, and Outcomes the least.

Table 41: Statewide TXIX/TXXI Domain Scores by Age Group (YSS-F)

	Age Group										
	0	-3	4-	12	13-	17					
	#	%	#	%	#	%					
Reporting Positively About Access	NA	NA	276	72%	179	71%					
Reporting Positively About Cultural Sensitivity	NA	NA	373	92%	227	88%					
Reporting Positively About Outcomes	NA	NA	276	60%	171	60%					
Reporting Positively About Participation in Treatment Planning	NA	NA	382	85%	238	82%					
Reporting Positively About General Satisfaction	NA	NA	341	75%	216	73%					

Note: NA means n < 30.

# **Benchmarking with Other States**

The Consumer Survey was originally developed as part of the 1996 *Mental Health Statistics Improvement Program (MHSIP) Consumer-Oriented Report Card*, and has since then become part of the federal *Data Infrastructure Grant (DIG)* and its *Uniform Reporting System (URS) Tables*. Many states across the nation are now collecting consumer survey data regularly.

The tables below show some examples of data for the 2005 MHSIP Consumer Survey, as published by the respective states. Future reports will include a more comprehensive comparison of the nationwide consumer survey results.

Consumer Perception of Satisfaction by Domain and State – Adult						
		Percent Respon	ding Positively			
State	Access Domain	Quality / Appropriateness Domain	Outcomes	Participation in Treatment Planning	General Satisfaction Domain	
Arizona	75%	84%	63%	71%	80%	
Tennessee	94%	96%	80%	89%	97%	
Texas	79%	83%	60%	72%	87%	
Alaska	68%	69%	55%	67%	77%	
Connecticut	83%	89%	81%	89%	89%	
California	83%	86%	66%	75%	88%	
South Dakota	77%	80%	56%	66%	81%	
Hawaii	81%	83%	69%	79%	84%	

The following patterns can be observed across states: for all states included in the table above, the outcomes domain was rated the lowest, with only 55% to 81% of adult consumers reporting positively. Tennessee posted the highest scores for three of the domains, and Connecticut posted the highest scores for the remaining domains. Arizona's domain scores were neither particularly high nor low as compared to the other states for most domains, but fell in the lower range for the Access and General Satisfaction domains.

For the consumer satisfaction survey for youth consumers, fewer data were readily available. Some states administered the adult version, but not the youth version of the MHSIP survey. This may be reflective of the types of consumers served by the different states' mental health administrations.

Consumer Perception of Satisfaction by Domain and State – Youth						
	Percent Responding Positively					
State	Access Domain	General Satisfaction Domain	Participation in Treatment Planning	Cultural Sensitivity	Outcomes	
Arizona	72%	74%	84%	92%	60%	
Tennessee	91%	96%	96%	97%	80%	
Texas	78%	77%	85%	90%	52%	
South Dakota	88%	80%	83%	88%	62%	
Oregon	67%	61%	73%	86%	56%	

Similar to the survey for adult consumers, Tennessee posted the highest satisfaction rates for all domains for youth consumers. Arizona's scores were among the higher scores for the Cultural Sensitivity domain, but one of the lower scores for the General Satisfaction domain. Outcomes were rated lowest across all states included in the comparison.

# **Benchmarking with Past Performance**

The 2005 consumer survey continued the efforts of the survey administrations in 1999, 2001, and 2003. While there were some changes in the early surveys, the MHSIP core items of the consumer surveys of 2003 and 2005 remained unchanged, as was the approach to the analysis of the survey responses. The following tables show results of the statewide consumer survey from 1999 - 2005 for all years, whenever applicable.

# Adult Consumer Survey: Statewide Domain Score Comparison

The table below gives the percentage of respondents responding positively across the domains for all four years of the statewide consumer survey. The increasing trend observed from 1999 to 2003 did not continue. Results from 2005 are slightly lower than in 2003, but the same or higher than in 2001 for all domains. The quality/appropriateness domain had the highest percentage of consumers satisfied, while the outcomes domain remains the lowest.

	Consumer Survey Percent Satisfied			
Domain	1999	2001	2003	2005
General Satisfaction	76%	80%	88%	80%
Access	71%	71%	77%	75%
Treatment Planning	NA	NA	75%	71%
Quality/Appropriateness	78%	79%	88%	84%
Outcomes	60%	58%	66%	63%

# Adult Consumer Survey: Survey Item Comparison

The percentage of consumers responding positively remained at or fell below the 2003 results for all items, but remained above the 2001 results with one exception: the percent of consumers responding positively that *the location of services was convenient* declined by 1 percentage point compared to 2001. The largest decline was observed in the percent of consumers responding positively to the item *"I like the services I receive here."* (from 89% in 2003 to 82% in 2005). As was the case in 2003, the lowest score was found in the outcomes domain, with only 57% of consumers responding positively to the item *"I do better in school and/or work."*. Highest percentage of satisfaction proved to be consistent across survey administrations: the item *"I was given information about my rights"* received the highest score in 2001, 2003 and 2005 (84%, 92% and 89% respectively. For 2005, this was tied with the item *"I felt comfortable asking questions about my treatment and medications."* 

Adult Consumer Survey Survey Item		Consumer Survey Percent Satisfied		
	2001	2003	2005	
I like the services that I received here.	81%	89%	82%	
If I had other choices I would still get services from this agency.	78%	83%	79%	
I would recommend this agency to a friend or family member.	83%	88%	83%	
The location of services was convenient.	78%	80%	77%	
Staff were willing to see me as often as I felt was necessary.	78%	84%	81%	
Staff returned my calls within 24 hours.	73%	75%	73%	
Staff were available at times that were good for me.	82%	85%	83%	
I was able to get all the services that I thought I needed.	71%	80%	76%	
I was able to see a psychiatrist when I wanted to.	68%	70%	68%	
Staff were sensitive to my cultural/ethnic background.	76%	82%	79%	
Staff here believe that I can grow, change, and recover.	76%	85%	83%	
I felt free to complain.	74%	83%	79%	
I was given information about my rights.	84%	92%	89%	
Staff told me what side effects to watch for.	72%	82%	77%	
Staff respected my wishes about who is, and who is not, to be given information about my treatment.	82%	88%	85%	
Staff helped me to obtain the information I needed so that I could take charge of managing my illness.	72%	82%	79%	
I was encouraged to use consumer-run programs.	66%	80%	79%	
I felt comfortable asking questions about my treatment and medications.	83%	89%	86%	
Staff encouraged me to take responsibility for how I live my life.	81%	87%	84%	
I, not staff, decided my treatment goals.	63%	73%	70%	
I deal more effectively with daily problems.	68%	75%	74%	
I am better able to control my life.	67%	74%	72%	
I am better able to deal with crisis.	63%	70%	69%	
I am getting along better with my family.	66%	71%	69%	
I do better in social situations.	56%	64%	61%	
I do better in school and/or work.	50%	62%	57%	
My housing situation has improved.	56%	60%	60%	
My symptoms are not bothering me as much.	58%	60%	63%	

# YSS-F: Statewide Domain Score Comparison

The table below gives the percent responding positively for each of the domains for the three survey cycles. As shown, domain scores were not calculated for the year 1999 because there was no family survey in existence during that time. As was observed for the Adult Consumer Survey, the increasing trend observed from 1999 to 2003 did not continue for the YSS-F. Results from 2005 are slightly lower than in 2003 for all domains, but higher than in 2001. As was the case in 2003, the Cultural Sensitivity domain had the highest percentage of consumers satisfied, while the Outcomes domain remains the lowest.

	Consumer Survey Percent Satisfied			
Domain	1999	2001	2003	2005
General Satisfaction	NA	68%	80%	74%
Access	NA	70%	78%	72%
Outcomes	NA	51%	62%	60%
Treatment Planning	NA	NA	85%	84%
Cultural Sensitivity	NA	NA	93%	92%

#### YSS-F: Item Comparison

For the YSS-F, four items stand out as continuing the trend to higher scores:

- "I helped to choose my child's services" increased to 84% in 2005 from 79% in 2003 and 64% in 2001.
- "I helped to choose my child's treatment goals." Increased to 87% in 2005 from 84% in 2003 and 74% in 2001.
- > "Staff were sensitive to our cultural/ethnic background." increased to 93% in 2005 from 89% in 2003 and 73% in 2001.
- "My child gets along better with family members." increased to 65% in 2005 from 64% in 2003 and 58% in 2001.

Overall satisfaction with services (item "Overall, I am satisfied with the services my child received.") remains at 86%, the same level as 2003.

Only the item "The location of services was convenient for us." showed a decrease in the percent of consumers expressing satisfaction, which fell below the 2001 results. Seventy-eight percent of respondents expressed satisfaction as compared to 81% in 2003 and 80% in 2001. For all remaining items, the 2005 score fell at or below the 2003 score, but not below the 2001 score.

The table below shows the item-by-item comparison for the years 2001, 2003 and 2005.

YSS-F Survey Item	Consumer Survey Percent Satisfied		
	2001	2003	2005
Overall, I am satisfied with the services my child received.	71%	86%	86%
The services my child and/or family received were right for us.	67%	82%	76%
My child and family got the help we wanted.	65%	81%	77%
My child and family got as much help as we needed.	55%	73%	73%
The location of services was convenient for us.	80%	81%	78%
Services were available at times that were convenient for us.	78%	87%	81%
I helped to choose my child's services.	64%	79%	84%
I helped to choose my child's treatment goals.	74%	84%	87%
The people helping my child stuck with us no matter what.	75%	84%	78%
I felt my child had someone to talk to when he/she was troubled.	69%	78%	72%
I was frequently involved in my child's treatment.	79%	92%	87%
Staff treated us with respect.	91%	95%	91%
Staff respected my family's religious/spiritual beliefs.	76%	90%	89%
Staff spoke with me in a way that I understood.	87%	96%	93%
Staff were sensitive to our cultural/ethnic background.	73%	89%	93%
My child is better at handling daily life.	63%	71%	71%
My child gets along better with family members.	58%	64%	65%
My child gets along better with friends and other people.	61%	67%	67%
My child is doing better in school and/or work.	63%	69%	67%
My child is better able to cope when things go wrong.	50%	60%	58%
I am satisfied with our family life right now.	53%	57%	57%

#### Conclusion

Overall, there was either no change or a slight decline in the domain and most item scores for adult and youth consumers from the survey years 2001 and 2003 to the survey year 2005. For the Adult Consumer Survey, areas of high and low satisfaction among consumers remained consistent with prior survey cycles. For the YSS-F, continued improvement was noted on three survey items: parental involvement in the child's treatment, cultural sensitivity on the part of the providers, and outcomes. These improvements may be attributed to the continued quality improvement initiatives undertaken by ADHS and the RBHAs.

## Statewide Survey Limitations, Issues, and Problems

Several limitations, issues, and/or problems were encountered by the RBHAs in their administration of the 2005 statewide consumer survey.

- For some providers increased staff involvement during the survey administration months resulted in disrupted regular front-line and supervisory staff activities. These delayed other responsibilities and/or required additional/temporary staff to prevent such delays.
- Some concern was expressed regarding the cover letter for the YSS-F. It was perceived by some to have a negative tone and to have invited criticism on the part of the survey respondent. It was recommended to reconsider the use of this cover letter for future survey administrations.
- Frequent front-line staff turnover remained a problem in some areas. Ongoing training and frequent updates regarding the survey administration were provided in an effort to limit disruptions to the survey administration process.
- In some areas, the number of internal and external providers increased considerably since the 2003 survey, leading to a greater number of providers being involved in the survey administration. This increase complicated attempts to provide adequate training, technical assistance and oversight.
- Control files completed by the providers had deficiencies. It was recommended to add a "date" field to the control files to facilitate reporting.
- Competing priorities within the provider offices remained an issue.

Overall, most of the problems identified were related to the involvement of the providers in the administration of the surveys.

As a result of these difficulties, the number of completed surveys fell below expectations. The sample sizes specified in the protocol were determined using a 95% confidence level and a 5% margin of error. While these sample sizes were not achieved, most RBHAs met or exceeded the sample sizes required for a 90% confidence level. Efforts should be focused on determining how future survey administrations can assure that sufficiently high numbers of surveys are collected to achieve the required sample sizes.